

OFFICE OF COMMISSIONER OF INSURANCE

COMMISSIONER OF INSURANCE • INDUSTRIAL LOAN COMMISSIONER • SAFETY FIRE COMMISSIONER

Ralph T. Hudgens, Commissioner

www.oci.ga.gov

Phone: 855-235-5174 ♦ E-mail: GAInslicensing@psionline.com

SELF-STORAGE PROVIDER LICENSE APPLICATION

AGENTS LICENSING GID-366-AL AUG2014

INSTRUCTIONS:

The license is required for the principal or home office location only. An officer of the applicant must sign the application; officer's signature must be notarized. Each applicant for licensure must remit payment in the form of a check or money order for \$115 (\$100 license fee and \$15 application filing fee.)

Make check or money orders payable to: PSI SERVICES LLC / GEORGIA INSURANCE DEPT

Effective 1-1-2012, submit with the application the Citizenship Affidavit Form GID-276-EN which is required of persons making application for all licenses in order to comply with the Georgia Illegal Immigration Reform And **Enforcement Act.**

1.						
	Full Name of Self-Storage Provider				EIN	
2. 	Principal or Home Office Address (include suite number)					
3.	City			Zip	County	
4.	Principal or Home Office Business Phone Number Principal or Home Office Business Fax Number					
5.	Contact Name Title					
_	E-mail Address					
I certify that all employees have received or will receive basic training as to the types of insurance products specified in O.C.G.A. 33-23-12(e)(3) prior to the offering of such products. Name of Officer of Self-Storage Provider Title of Officer of Self-Storage Provider						
Signature of Officer of Self-Storage Provider Date						
NOTA	OTARY Sworn to and Subscribed before Me this		itate of		(Seal)	
(,)						
Mailing Instructions along with payment, to:		Mailing Address Without Paymer PSI Services LLC, 2997 Cobb Parkway SE P.O. Box 723957 Atlanta, Georgia 31139	nts:	Mailing Address With Payments: Bank of America Lockbox Services Lockbox 742983 6000 Feldwood Road College Park, Georgia 30349		